

**REQUEST FOR APPLICATIONS – FEDERAL FUNDS**

The State of Nebraska, Department of Health and Human Services, Division of Children and Family Services, (“DHHS”) Nebraska Homeless Assistance Program (NHAP), is issuing this Request for Applications (“RFA”) for the purposes of entering into grant agreement(s) (“subaward” or “subawards”) and awarding federal funds to an eligible and qualified entity to provide homeless assistance services. A more detailed description may be found in **Project Description, Section 2**.

RFA #	RELEASE DATE
5961	FEBRUARY 17, 2023
APPLICATION DUE DATE	POINT OF CONTACT
MARCH 17, 2023	DHHS.Grants@nebraska.gov

INITIAL PERIOD OF PERFORMANCE	TOTAL FUNDING AVAILABLE
JULY 1, 2023 – JUNE 30, 2024	\$47,423.41

The resulting subaward from this RFA is subject to and shall follow federal regulation, as set forth herein. Subrecipients receiving subawards may only be paid up to the actual and allowable costs (as defined herein) of completing the **Project Description, Section 2**. No Subawards resulting from this RFA will be fee-for-service contracts, regardless of the method of payment, and no Subrecipient may keep a profit from its subaward. More detail about the terms of this funding is set forth in **Terms, Section 5**, below.

A copy of this RFA may be found online at DHHS’ website at <http://dhhs.ne.gov/Pages/Grants-and-Contract-Opportunities.aspx>. Until final Subawards are signed, all other information pertinent to this RFA, including but not limited to any amendments or addenda, will be posted on the DHHS website.

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1. RFA OVERVIEW

1.1. Funding Information

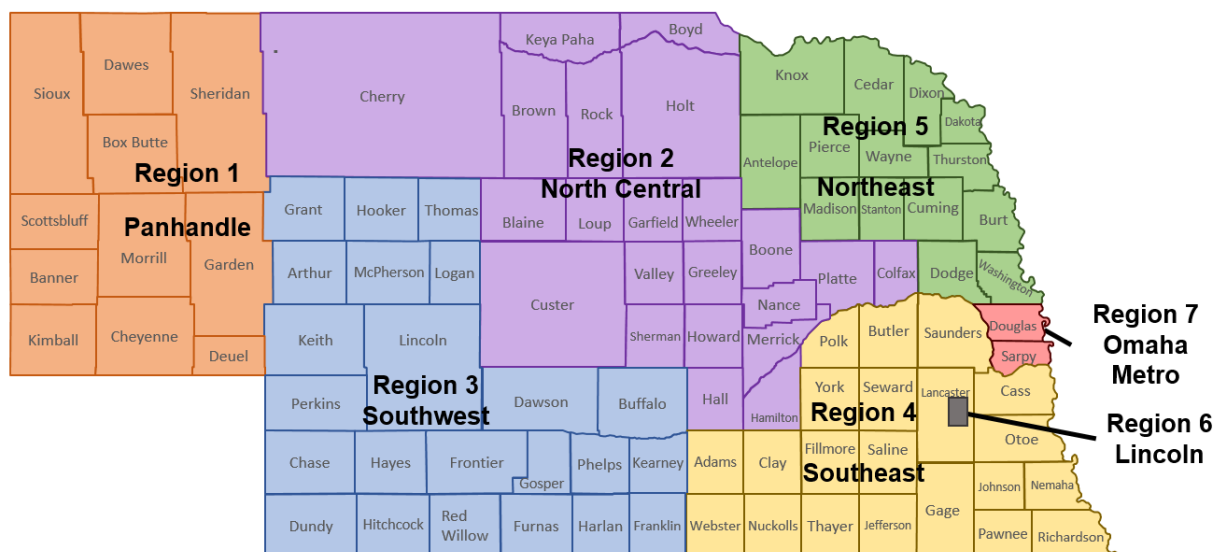
Federal Agency Name	Catalog of Federal Domestic Assistance (CFDA) Name	CFDA Number
United States Department of Housing and Urban Development	Emergency Solutions Grant Program	14.231

The total anticipated available funds for Subawards under this RFA is \$47,423.41 [Fourty Seven thousand four hundred twenty three and forty one cents]. A total award of this amount of funds is not guaranteed, but is subject to the Applications received, to actual money awarded to DHHS from the Federal Awarding Agency, and to DHHS' discretion. DHHS may establish a cap on total amount of funds that any one Applicant, or Applicants acting jointly, may request. Any cap shall be set forth in the **Applications Instructions, Section 4.4**, below. The total funds may be split among multiple Subrecipients in the discretion of DHHS.

1.1.1. 2023-2024 NHAP Regional Allocation

To serve the needs of people who are homeless throughout the entire state, NHAP allocates funds according to the geographic regions identified on the map located below:

Regional Coalitions to End Homelessness



NHAP followed its funding formula, identified in the Annual Action Plan submitted to HUD, in determining the amount of funds available per region for 2023-2024. Following the notice of intent to award, funding remained available for the service areas of Lancaster and Saunders Counties in Region 4. This RFA is a relaunch of the initial 2023-2024 NHAP Annual Grant RFA and pertains only to the remaining funds specific to Lancaster and Saunders service areas.

The funding for this RFA comes from the Homeless Shelter Assistance Trust Fund (HSATF) and the U.S. Department of Housing and Urban Development (HUD) Emergency Solutions Grant (ESG). The ESG is federal funding received from HUD. The actual amount of ESG funding that will be available for the 2023-2024 NHAP program year is unknown at this time. For the initial RFA, it was anticipated that \$872,717.12

in ESG funds would be available for the Subawards based on the current program year's ESG allocation. The remaining funding for Subawards under the initial RFA was comprised of \$2,296,625.65 in state funding through the HSATF. Based on funding determinations from the initial RFA, the amount below is available to be requested in order to serve Lancaster and Saunders Counties:

Region	HSATF and ESG Funds Available
Region 4	\$47,423.41

1.2. Period of Performance

The Period of Performance is the time during which a successful Applicant may incur costs to carry out the work authorized under this RFA and the resulting Subaward. See the definitions in 2 CFR § 200.77 or 45 CFR § 75.2. The initial Period of Performance for this RFA is from July 1, 2023 to June 30, 2024. This period may be extended by DHHS as allowable by the Federal Funding Agency. If state funds are involved in the award, this may also determine whether DHHS may extend a Period of Performance.

For the initial Period of Performance, all costs must be liquidated (i.e., spent) by June 30, 2024 and invoiced to DHHS by July 31, 2024. These dates are dependent on federal periods of allowability and DHHS' own ability to timely process payments. They may be subject to change; final dates will be included in the final Subaward between the parties. If an Applicant believes it cannot meet these deadlines, it should not apply for funding under this RFA. Obligation and liquidation deadlines may be extended as allowed by the Federal Funding Agency, but no extensions are guaranteed. Future Periods of Performance, as allowed by DHHS, may have different obligation and liquidation deadlines.

1.3. Applicable Law

Because the funds to support the activities under this RFA involve federal funds, usage of these funds is subject to federal law, in addition to any applicable state law. The Uniform Grant Guidance, [2 CFR §§ 200 et seq.](#) ("UGG") applies to subawards funded from the United States Department of Agriculture (USDA), the Department of Housing and Urban Development (HUD), the Department of Labor (DOL), the Environmental Protection Agency (EPA) or other federal agencies. The United States Department of Health and Human Services (HHS) has adopted the UGG, but has implemented and re-codified it at [45 CFR §§ 75 et seq.](#) ("HHS GG"); for awards funded by HHS, those regulations apply. Throughout this RFA, both the UGG and the HHS GG will be cited, although they are substantially similar.

The HHS GG shall apply to this RFA if it awards funds from block grants authorized by the Omnibus Budget Reconciliation Act of 1981, unless Nebraska statute or regulation has established provisions for the payment costs and services; in all other respects, as provided herein, those block grant subawards are governed by [45 CFR §§ 96 et seq.](#)

Additional federal and state statutes and regulations may apply to the funding contained herein. These may be included in **Additional Program Requirements, Section 5.7**, below, as well as in the Subaward itself.

Further information about allowable costs and activities may be set forth herein.

1.4. Eligible Entities

Any Applicant for this RFA must be "(1) units of general purpose local government in the State, which may include metropolitan cities and urban counties that receive ESG funds directly from HUD; or (2) Private nonprofit organizations, provided that for emergency shelter activities the recipient obtains a certification of approval from the unit of general purpose local government for the geographic area in

which those activities are to be carried out”, per 24 CFR 567.202(a). Any Application submitted by an ineligible Applicant shall be rejected without scoring.

- 1.4.1. Any Application submitted by an ineligible Applicant shall be rejected without scoring. NHAP adopted a two-year funding cycle in 2003. The first year involves a competitive application process that is open to any eligible applicant. The second year is a renewal application process that is open only to existing NHAP recipients in good standing. Grant year 2023-2024 is the second year of the two-year cycle. Thus, NHAP recipients eligible to apply for funding in 2023-2024 are limited to NHAP recipients that received funding in 2022-2023.
- 1.4.2. To be eligible for NHAP funding, entities must meet one of the following provisions:
 - 1.4.2.1. Provide transitional living services for at least eight hours of every twenty-four hour period, as defined by the state and federal rules and regulations governing HUD’s Emergency Solutions Grant (ESG) program and Nebraska’s HSATF. To receive NHAP funding for transitional living, an applicant must be an existing NHAP recipient of funding for transitional living services; or
 - 1.4.2.2. Provide homelessness prevention, rapid rehousing, street outreach or shelter services for individuals and families who are homeless or at risk of homelessness in compliance with the state and federal rules and regulations governing HUD’s ESG program and Nebraska’s HSATF.
- 1.4.3. To be eligible for NHAP funding, entities must satisfy all of the following:
 - 1.4.3.1. Have at least two years of experience successfully providing homeless assistance services using a Continuum of Care approach;
 - 1.4.3.2. Provide evidence of participation in one of the three Continuums of Care in the State via Form 5, attached;
 - 1.4.3.3. Provide documentation from one of the three Continuums of Care in the State for the need for the proposed services identified in their application;
 - 1.4.3.4. Be exempt from taxation under section 501(c)3 of the Internal Revenue Code of 1986 or represent a number of eligible applicants;
 - 1.4.3.5. Not discriminate based on age, religion, sex, race, color, disability, sexual orientation, gender identity, or national origin (24 CFR 5);
 - 1.4.3.6. Operate drug-free premises; and,
 - 1.4.3.7. Conduct an annual, certified, external financial audit/financial report within the last 12 months.
- 1.4.4. To be eligible for funding for the emergency shelter component, entities must maintain shelter facilities in compliance with HUD’s minimum standards at 24 CFR 576.403, and entities must obtain approval by local governments for all cities or counties where the shelter will occur. Local government approval is required even for entities providing motel/hotel vouchers via Form 7, attached.
- 1.4.5. To be eligible for funding for a new shelter, entities must obtain approval from NHAP. Before funding a new shelter, NHAP must conduct environmental reviews and ensure the shelter is in compliance with HUD’s minimum standards at 24 CFR 576.403.

Additional requirements for determining the eligibility of entities may also be included in the Project Description.

1.5. Award of Funding

DHHS will evaluate Applications in the manner set forth herein. An Intent to Subaward will be posted on the DHHS Website with selected Applicants. Funds will be awarded through a written agreement, termed a Subaward, which will incorporate this RFA by reference. No promise for funds is binding on DHHS, and no funds will be paid to any Applicant until a Subaward has been executed by both the Applicant and DHHS.

2. PROJECT DESCRIPTION

2.1. Background and Purpose

DHHS, Division of Children and Family Services is issuing this RFA for the purposes of serving the needs of people who are homeless or near homeless.

BACKGROUND

The Nebraska Department of Health and Human Services (DHHS) has combined the Nebraska Homeless Shelter Assistance Trust Fund (HSATF) and the U.S. Department of Housing and Urban Development's (HUD) Emergency Solutions Grant (ESG) application process into one single application. The combined process and application will be referred to as the Nebraska Homeless Assistance Program (NHAP) application. NHAP will provide technical assistance, as needed or requested, to assist successful NHAP applicants in the appropriate use and administration of NHAP funds.

The Act to Prevent Mortgage Foreclosures and Enhance Mortgage Credit Availability Act was signed into law on May 20, 2009 (Public Law 111-22). Division B of this law is the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act). The HEARTH Act amends Subtitle B of Title IV of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11371-11378) to rename the program the Emergency Solutions Grants (ESG) program, expand the range of eligible activities under the program, and add or change certain program requirements. The expanded activities include homelessness prevention and rapid rehousing components. The purpose of the ESG program is to assist individuals and families to quickly regain stability in permanent housing after experiencing a housing crisis or homelessness.

In 2001, the Nebraska Legislature passed LB516, which transferred the administration of the HSATF to the Nebraska Health and Human Services System. At the same time, Governor Johanns requested that HUD transfer the administration of the ESG Program to the Health and Human Services System. HUD granted this request, and on September 1, 2001, the administration of both Nebraska's HSATF and HUD's ESG Program became the responsibility of the Nebraska Department of Health and Human Services.

PURPOSE

The purpose of the NHAP grant funds is to address the needs of individuals and families experiencing, or at risk of experiencing, homelessness in Nebraska by assisting in the alleviation and prevention of homelessness, providing temporary or permanent housing for persons who are homeless, and encouraging the development of projects that link housing assistance programs with efforts to promote self-sufficiency.

2.2. Scope of Work

Agencies awarded this funding will be responsible for providing homeless assistance services within their respective service areas. Agencies may apply for funding for the following service components: street outreach, emergency shelter, homelessness prevention, rapid rehousing, and Homeless Management Information System (HMIS).

2.2.1. Required Activities by All Funded Agencies. Agencies awarded annual NHAP funding must:

2.2.1.1. Comply with federal ESG and state HSATF requirements found in the Code of Federal Regulations Title 24 Part 576 (ESG), Title 2 Part 200 (Uniform Grant Guidance), Nebraska Revised Statutes 68-1601 through 68-1608 (HSATF), and Nebraska Administrative Code Title 462 (HSATF).

2.2.1.2. Comply with the written ESG/NHAP standards approved by the relevant Continuum of Care, which can be found on the NHAP website at: <http://dhhs.ne.gov/Pages/Nebraska-Homeless-Assistance-Program-Providers.aspx>.

2.2.1.3. Work to incorporate the following best practices from the Housing First Model; The list below is not all encompassing:

2.2.1.3.1. Involve homeless individuals and families in constructing, renovating, maintaining, operating, and providing homeless assistance services. This involvement can be through employment or volunteer efforts.

2.2.1.3.2. Remove prerequisites such as abstinence, sobriety, minimum income requirements, health or mental history, financial history, completion of

- treatment, occurrence of victimization, “housing readiness,” participation in services, medication adherence, age, criminal history, or other conditions unless required by law or funding source.
- 2.2.1.3.3. Admit to program services is expedited with speed and efficiency.
 - 2.2.1.3.4. Intake processes are person-centered and flexible.
 - 2.2.1.3.5. Exits to homelessness are avoided.
 - 2.2.1.3.6. Participants are educated about their rights and responsibilities as lease holders.
 - 2.2.1.3.7. Participants are educated about Housing First and the service models employed by the agency.
 - 2.2.1.3.8. Input from participants is welcomed regarding the agency's policies, procedures, and practices. Opportunities include involvement in: quality assurance and evaluation processes, surveys, focus groups, social gatherings, integrating peer specialists and peer-facilitated support groups to compliment professional services.
 - 2.2.1.3.9. Training staff in clinical and non-clinical strategies, including harm reduction, motivational interviewing, trauma-informed and strength-based approaches;
 - 2.2.1.3.10. Housing is not dependent on participation in services.
 - 2.2.1.3.11. Services are continued despite changes in housing status or placement. Ideally, the service relationship should continue, despite a service hiatus during short-term institutional stays;
 - 2.2.1.3.12. Staff are sensitive to and support the cultures of diverse households. When possible, staff demographics reflect the participant population they serve in order to provide, appropriate, culturally-specific services; and,
 - 2.2.1.3.13. Agency rules and regulations are centered on participants' rights.
 - 2.2.1.4. Participate in the 2023-2024 count of homeless individuals, homeless families, and housing inventory undertaken by DHHS or their designee;
 - 2.2.1.5. Follow the NHAP HMIS workflow and participate in NHAP's identified HMIS database. Agencies must enter all required NHAP and HUD data elements for all persons served and all NHAP-funded activities into the identified HMIS database. However, victim or legal service providers who agree to collect all of the required NHAP and HUD data elements for all persons served and all NHAP-funded activities may enter them into an electronic database system comparable to the HMIS;
 - 2.2.1.6. Provide services, such as: assessing housing needs; assessing service needs; and arranging, coordinating, and monitoring the delivery of individualized services to meet the needs of the program participant. These services and activities should include:
 - 2.2.1.6.1. Conducting the initial evaluation required under 24 §576.401(a), including verifying and documenting eligibility.
 - 2.2.1.6.2. Counseling.
 - 2.2.1.6.3. Developing, securing and coordinating services.
 - 2.2.1.6.4. Assisting participants in obtaining Federal, State, and local benefits, including but not limited to the following:
 - 2.2.1.6.4.1. Medicaid (42 CFR chapter IV, subchapter C).
 - 2.2.1.6.4.2. Supplemental Nutrition Assistance Program (7 CFR parts 271-283).
 - 2.2.1.6.4.3. Women, Infants and Children (WIC) (7 CFR part 246).
 - 2.2.1.6.4.4. Federal-State Unemployment Insurance Program (20 CFR parts 601-603, 606, 609, 614-617, 625, 640, 650).
 - 2.2.1.6.4.5. Social Security Disability Insurance (SSDI) (20 CFR part 404).
 - 2.2.1.6.4.6. Supplemental Security Income (SSI) (20 CFR part 416).
 - 2.2.1.6.4.7. Child and Adult Care Food Program (42 U.S.C. 1766(t) (7 CFR part 226));
 - 2.2.1.6.5. Monitoring and evaluating program participant progress;
 - 2.2.1.6.6. Providing information and referrals to other providers;
 - 2.2.1.6.7. If a victim services provider, providing ongoing risk assessment and safety planning with victims of domestic violence, dating violence, sexual assault, and stalking; and,

- 2.2.1.6.8. Developing an individualized housing and service plan to include planning a path to permanent housing stability.
- 2.2.1.7. Adhere to HUD's final rule by providing equal access to HUD assisted or insured housing without regard to actual or perceived sexual orientation, gender identity, or marital status. Agencies must also prohibit inquiries regarding sexual orientation or gender identity.
- 2.2.2. Create and maintain records to enable DHHS and HUD to determine whether ESG and HSATF requirements are being met. Agencies must allow DHHS and HUD access to HMIS for NHAP funded records.
- 2.2.3. Use a centralized or coordinated program participant assessment, as developed by the relevant Continuum of Care. Awardees meeting HUD's definition of a "victim service provider" may choose not to use the Continuum of Care's centralized or coordinated assessment system.
- 2.2.4. Enter complete, accurate and timely program and participant data in HMIS, or a comparable database for agencies exempt from the federal HMIS requirement as identified in 24 CFR §§ 576 et seq. Data shall include, at a minimum, the required data elements as defined by HUD and shall be entered as close to real time as possible.
- 2.2.5. Provide written certification to Legal Aid of Nebraska, on a form approved by DHHS, indicating the participant has been screened and is eligible for street outreach, emergency shelter, homelessness prevention, or rapid rehousing services when referring a NHAP participant for legal services. The referral form for Legal Aid is located at: <http://dhhs.ne.gov/Pages/Nebraska-Homeless-Assistance-Program-Providers.aspx>.
- 2.2.6. Participate in required educational or technical assistance sessions.
- 2.2.7. Subscribe to and utilize NHAP's Provider webpage for funding and resource information at the following current location, or as later modified by DHHS: <http://dhhs.ne.gov/Pages/Nebraska-Homeless-Assistance-Program-Providers.aspx>.
- 2.2.8. Subscribe to and utilize HUD's Exchange Mailing List page for ESG related updates and announcements.
- 2.2.9. Adhere to the criteria outlined in [24 CFR 576](#).
- 2.2.10. Adhere to the criteria outlined in [24 CFR 576.101](#) if awarded funding for the street outreach component.
- 2.2.11. Adhere to the criteria outlined in [24 CFR 576.102](#) if awarded funding for the emergency shelter component.
- 2.2.12. Adhere to the criteria outlined in [24 CFR 576.103](#) if awarded funding for the homelessness prevention component.
- 2.2.13. Adhere to the criteria outlined in [24 CFR 576.104](#) if awarded funding for the rapid rehousing component.
- 2.2.14. Adhere to the criteria outlined in [24 CFR 576.107](#) if awarded funding for the HMIS component.

2.3. Performance Requirements

- 2.3.1. Awardees must meet the performance goals established by the Awardee in the application.
- 2.3.2. Standard performance measurements for each component type (street outreach, emergency shelter, homelessness prevention, and rapid rehousing) are:
 - 2.3.2.1. Increase the percent of discharges to permanent housing;
 - 2.3.2.2. Reduce the percent of individuals who return to homelessness after discharge to permanent housing destinations; and,
 - 2.3.2.3. Reduce the missing/null data error rates.
 - 2.3.2.3.1. NHAP understands there may be missing social security number (SSN) information for victims of domestic violence, sexual assault, stalking (per the Violence Against Women Act), or for immigrants who are not US citizens or nationals. Services cannot be withheld when necessary to protect life or safety.
- 2.3.3. Awardee must submit required performance measurements in the format established by NHAP on a quarterly basis or as requested by NHAP.
- 2.3.4. At any time during the term of the award, DHHS may require the Awardee or Subrecipient to provide written justification of unmet performance goals.
- 2.3.5. Future project funding is subject to the Awardee or Subrecipient meeting the performance standards or providing adequate justification, subject to DHHS approval.

2.4. Reporting Requirements

- 2.4.1. Awardees must gather and record the necessary information into the HMIS or comparable system for domestic violence service providers exempt from using HMIS.
 - 2.4.1.1. Awardees in the Omaha Continuum of Care (CoC) must submit complete and accurate quarterly data reports for the preceding quarter to the HMIS System Administrator selected by the Omaha CoC as determined by DHHS.
 - 2.4.1.2. Awardees in the Balance of State CoC must submit complete and accurate quarterly data reports for the preceding quarter to the HMIS System Administrator selected by the Balance of State CoC as determined by DHHS.
 - 2.4.1.3. Awardees, who are domestic violence shelters and who do not utilize the HMIS System, must submit complete and accurate quarterly data reports for the preceding quarter to the NHAP office as determined by DHHS.
- 2.4.2. Awardees must submit the Consolidated Annual Performance Evaluation Report (CAPER) in the manner determined by HUD. Due dates for the CAPER report will be communicated in advance by email.
- 2.4.3. Awardees must provide reports, data, and other information as requested by DHHS for review and programmatic monitoring by the due dates established.

3. RFA PROCEDURE

This RFA seeks Applications to complete activities allowable under the funding source identified in 1.1, above. All Applications must conform to all instructions, conditions, and requirements included in this RFA. Applicants should carefully examine this RFA, as well as the requirements on the state or federal funds involved. Applications that DHHS determines do not conform to the requirements of this RFA, or Applications from ineligible entities, may be considered non-responsive and rejected without scoring.

3.1. RFA Point of Contact (“POC”)

DHHS Office of Procurement
and Grants
PO Box 94926
Lincoln, NE 68508
DHHS.Grants@nebraska.gov

From the date the RFA is issued until the Intent to Subaward is issued, communication from the Applicant or prospective Applicant is limited to the POC listed above (but see exceptions, below). After the Intent to Subaward is issued, the Applicant may communicate with individuals DHHS has designated as responsible for negotiating the Subaward on behalf of DHHS. No member of the state government, employee of the state, or member of the Evaluation Committee is empowered to make binding statements regarding this RFA. The POC will issue any clarifications or opinions regarding this RFA in writing. Only the POC has the authority modify the RFA, answer questions, or render opinions on behalf of DHHS. Applicants shall not have any communication with, or attempt to communicate or influence any Evaluator.

The following exceptions to these restrictions are permitted:

1. The email submission of the Application to the designated email address designated in **Submission of Applications, Section 3.5;**
2. Contact made pursuant to pre-existing contracts, subawards, or obligations;
3. Contact required by the schedule of events or an event scheduled later by the RFA POC; and
4. Contact required for negotiation and execution of the final subaward.

DHHS reserves the right to reject an Applicant's application, withdraw an Intent to Subaward, or terminate a Subaward if DHHS determines there has been a violation of these procedures.

3.2. Schedule of Events

ACTIVITY		DATE/TIME
1.	Release RFA	February 17, 2023
2.	Last day to submit written questions	February 24, 2023
3.	State responds to written questions through RFA “Addendum” and/or “Amendment” to be posted to the Internet at: http://dhhs.ne.gov/Pages/Grants-and-Contract-Opportunities.aspx	March 3, 2023
4.	Application Review Period Begins (Application due date)	March 17, 2023
5.	Evaluation Period	March 18, 2023- March 29, 2023
6.	Post “Intent to Subaward” to Internet at: http://dhhs.ne.gov/Pages/Grants-and-Contract-Opportunities.aspx	March 31, 2023
7.	Period of Performance Start*	July 1, 2023

**The Period of Performance start may occur before a Subaward is finalized, agreed to, and executed by the parties. Because this is just the period during which costs are allowable, it does not reflect that any agreement between DHHS and any successful Applicant has gone into effect or is binding in any way. No binding agreement has been made between DHHS and any Applicant until a Subaward is fully executed by both parties.*

3.3. Written Questions and Answers

Questions regarding information needed for an Application, as well as the meaning or interpretation of any RFA provision, must be submitted in writing to POC via email and clearly marked "RFA Number 5362; Questions." The POC is not obligated to respond to questions that are received late, as set forth in the Schedule of Events.

Applicants should present, as questions, any assumptions upon which the Application is or might be developed. Applications will be evaluated without consideration of any known or unknown assumptions of an Applicant. The Subaward will not incorporate any known or unknown assumptions of an Applicant.

Questions must be sent via e-mail to **DHHS.Grants@nebraska.gov**. DHHS recommends that Applicants submit questions using the following format:

RFA Section Reference	RFA Page Number	Question

Written answers will be posted at the DHHS Website per the Schedule of Events. Written answers will become part of this RFA.

3.4. Submission of Applications

DHHS is accepting either electronically submitted responses or hard copy, paper responses for this funding opportunity. There is a limit of one application per agency. Applicants must submit a complete Application, including all the parts required herein, in one of two ways:

3.4.1 Electronic Response:

Applicants submitting electronically can upload the response via ShareFile here:

ShareFile link

<https://nebraska.sharefile.com/r-r49056780351f4beeaf8e8570e4483e15>

Applicants should reference **Attachment A: End User Guidance: Shared File Link** for more information regarding ShareFile.

The submission shall include the Application as a single Portable Document Format (PDF) or multiple PDFs. Failure to provide the Application in the correct format may result in DHHS being unable to read or open the Application and thus rejecting it without Evaluation.

The applicant should clearly identify the uploaded response files. To assist in identification please use the following naming convention:

RFA5961 ABC Company

If multiple files are submitted for one funding opportunity, add number of files to file names:

RFA5961 ABC Company File 1 of 2

If multiple responses are received, DHHS will retain only the most recently submitted response. It is the applicant's responsibility to submit the response by the date and time indicated in the Schedule of Events. Electronic responses must be received by DHHS by the date and time of the due date per the Schedule of Events. No late responses will be accepted.

3.4.2 Physical Mailing Response:

Option 1. Submission directly to the POC via United States Postal Service mail. The Application shall be sent to the POC's address listed above in Point of Contact, Section 3.1. The Application itself shall remain sealed and shall not be opened until the beginning of the Application Review Period.

Option 2. Hand delivered responses or responses delivered by FedEx or UPS should be delivered to:

ATTN: Office of Procurement and Grants
DHHS - 3rd Floor Reception Desk
301 Centennial Mall South
Lincoln, NE 68509

The Application itself shall remain sealed and shall not be opened until the beginning of the Application Review Period.

Regardless of submission method, Applicants must use the forms supplied by DHHS in this RFA unless specifically otherwise indicated herein. All Applications must be received by the beginning of the Application Review Period, as stated in the **Schedule of Events, Section 3.2.**

3.5. Evaluation Committee

Applications are evaluated by members of an Evaluation Committee(s). The Evaluation Committee(s) will consist of individuals selected at the discretion of DHHS. All members of the Evaluation Committee will disclose to DHHS any potential conflicts of interest before evaluation. Members with a conflict will be removed from the Evaluation Committee before scoring.

Any contact, attempted contact, or attempt to influence an evaluator that is involved with this RFA may result in the rejection of this Application and further administrative actions.

3.6. Evaluation of Applications

All complete Applications that are responsive to the RFA will be evaluated. DHHS reserves the right to evaluate Applicants and award funds in a manner utilizing criteria selected at DHHS' discretion and in the best interest of meeting the objectives of the funding involved. The Evaluation will be conducted by the following method:

DHHS will initially evaluate all Applications to determine whether the Applicant is an eligible entity; whether the Application meets the minimum requirements of this RFA; and whether the Applicant poses risk of noncompliance with federal statutes, regulations, and the terms and conditions of the Subaward, such that DHHS should not award funding. DHHS will award to the top scoring Applicant or Applicants, as DHHS determines and as funding allows. DHHS will conduct a fair, impartial, and comprehensive evaluation of all Applications in accordance with the predetermined criteria based on the Application. The Applicant's responses to the Forms will be scored through a point method set forth below. DHHS will evaluate on the following categories with a maximum point potential for each:

1. **Applicant's Organizational Overview.** Applicants will receive higher scores if they have a defined and clear organizational structure; organizational experience in federal grants; qualified and capable personnel with experience in federal grants or equivalent credentials or experience; or can otherwise demonstrate that they will be a reliable subrecipient who will use all awarded funds in a manner consistent with law and the requirements of this RFA. **(25 points)**
2. **Applicant's Work Plan.** Applicants will receive higher scores if their work plan responds to the Project Description and meets the goals or objectives of the federal funding and RFA, as well as evidencing the ability to meet expected outcomes, adhere to reporting deadlines or other deadlines, and complete any required evaluation activities. DHHS exercises sole discretion as to

whether the Application adequately addresses the purposes and objectives of the federal funding DHHS has received. **(100 points)**

3. **Applicant's Budget.** Applicants will receive higher scores if the budget is tailored to the work plan and utilizes allowable direct and indirect costs. Total request for funding itself will not determine score; rather, Applicants will be scored based on whether the budget accurately reflects allowable costs of completing the work set forth in the work plan. Points will be deducted if any funds awarded in the 2021-22 NHAP program year were not fully expended. **(50 points)**
4. **Performance Outcomes.** Applicants will receive higher scores if data metrics demonstrate the proposed number of individuals to be served by the respective project is appropriate and whether the performance outcomes are reasonable per the population served by the funded activity. Applicants will also receive higher points if the percentage of missing data is low. **(50 points)**
5. **Quality of Application.** Applications will receive higher scores if the information presented is accurate, complete, well-presented, and free of spelling, grammatical, and mathematical mistakes. Additionally, all acronyms must be spelled out at their first mention, indicating their abbreviation in parenthesis. **(5 points)**
6. **Additional Requirements:** Applicants must include the additional documentation listed in Section 4.5. **(Not weighted)**

There are 230 total points available for Applications under this RFA.

DHHS may award to a single top Applicant, or may award to multiple top-scoring Applicants, in its sole discretion. If all Applicants meet the minimum requirements and are meritorious, DHHS may also elect to award to all Applicants.

3.7. Late Applications

Applications received after the time and date of the Application opening will be considered late Applications. Late Applications will be rejected. All Applications must be electronically or physically received by the date and time of the Application Opening. The State is not responsible for Applications that are late or lost regardless of cause or fault. It is the Applicant's responsibility to ensure Applications are received timely.

3.8. Corrections

An Applicant may correct a mistake in an Application prior to the time of opening by giving written notice to the POC of intent to withdraw the Application for modification, or to withdraw the Application completely. Changes in an Application after the Evaluation Period has begun are acceptable only if the change is made to correct a minor error. Whether an error is minor shall be determined by DHHS.

3.9. Grievance and Protest Procedures

All grievances must follow the DHHS Subaward Grievance/Protests Procedures, available on the DHHS website. Grievances must be filed timely.

3.10. Competition / Joint Efforts

Applicants may cooperate or submit Applications jointly, but all such Applications must clearly identify the Applicants involved, the roles each will have administering the subaward, and that they are eligible for the subaward, as set forth herein. Applicants may create a legal entity, or describe a plan for the creation of a legal entity, as a cooperative or joint venture if the entity itself is eligible for the subaward and all Applicants are also eligible. DHHS shall determine the proper method for any resulting subaward, should the joint Applicants be selected for funding.

3.11. DHHS Reservations of Authority During Application and Evaluation Process

After Evaluation of the Applications, or at any point in the RFA process, DHHS may take one or more of the following actions:

1. Amend the RFA;
2. Extend the time of or establish a new Application opening time (i.e., allowing additional time to submit Applications);
3. Waive deviations or errors in the RFA process and in Applications that are not material, do not compromise the RFA process or an Application, and do not improve an Applicant's position;
4. Accept or reject a portion of or all of an Application;
5. Accept or reject all Applications;
6. Withdraw the RFA; or,
7. Elect to reissue the RFA.

DHHS reserves the right to adjust the Applicant's budget with successful Applicants after the Intent to Subaward is issued. DHHS also reserves the right to adjust the Work Plan with Applicant to meet the requirements of the grant, Federal Funding Agency, law, or to meet DHHS programmatic needs. DHHS also reserve the right to apply additional conditions based on the successful Application and the result of a pre-award risk assessment. If a scoring method is used to rank applications to determine funding amounts, all adjustments shall have no bearing on rank

If DHHS rejects all Applications, it may enter either reissue an RFA with the same or different specifications and terms, or it may negotiate a single or multiple Subawards with individual Applicants or non-Applicants.

4. APPLICATION INSTRUCTIONS

4.1. Application Contents

A complete, responsive Application must contain the following completed documents:

1. Form 1 – Application Form and Cover Sheet;
2. Form 2 – Organizational Overview;
3. Form 3 – Applicant's Response to the Work Plan Questions;
4. Form 4 – Applicant Budget and Proposed Performance Outcomes;
5. Form 5 – CoC Verification;
6. Form 6 – Additional Information

Applications that do not contain all of the required sections will be rejected. Any section that should not be considered for funding (e.g., Street Outreach project) must be indicated by a "Not Applicable" statement or a strike through the page(s). An editable Microsoft Word-formatted document of the Forms will be posted on the DHHS Website, which Applicants may fill in and submit.

4.2. Applicant's Organizational Overview

The Applicant's Organization Overview section shall contain the following information about the Applicant. If the Application is a cooperative or joint venture between two or more entities, all information required in this section shall be provided for all entities, even if a new legal entity has been created or is planned to be created for the purposes of the Subaward.

1. **Organization Information.** Applicant's full legal name, including any other "doing business as" names, or any previous names the organization used. A Unique Entity Identifier (UEI) shall be provided. A parent UEI shall also be provided, if applicable.
2. **Summary of Federal Grants Experience.** A description of Applicant's previous experience with receiving federal funds. This shall include, but not be limited to, experience receiving federal funds as a recipient or a subrecipient. Applicant should describe and demonstrate knowledge of the Uniform Grant Guidance / HHS Grants Guidance (as applicable), as well as any specific experience with the particular federal program and funding source that funds this RFA.

3. **Summary of Programmatic Experience.** A description of Applicant's experience with the type of programming or work contained in the Project Description, or other relevant work.
4. **Personnel and Management.** Applicant should identify individuals employed by Applicant, on its board of directors, or otherwise affiliated with Applicant, who have a demonstrated knowledge or experience with federal grants, the Uniform Grant Guidance or the HHS Grants Guidance, programmatic experience, or other relevant experience.
5. **Agreements Terminated or Costs Disallowed.** Applicant must provide a summary of any agreements executed within the last five (5) years with federal awarding agencies or pass-through entities (either as grant agreements, cooperative agreements, subawards, or contracts) that:
 - Were terminated for cause; or
 - Where Specific Conditions were placed on Applicant (see 2 CFR § 200.207 or 45 CFR § 75.207).

If an Applicant has been disbarred by the United States Federal government, it is not eligible to receive funding under this RFA.

4.3. Applicant's Work Plan

The Work Plan must respond in detail to the Project Description. It must contain a description of the work activities Applicant is proposing to complete under the RFA. It should contain an understanding of the requirements for the project under the applicable federal or state funding sources (or both), and, as applicable, descriptions of timelines, outcome/process measures, and program evaluation activities.

4.4. Applicant's Budget

Each budget should contain only costs that are allowable under the applicable federal statutes, regulations, terms and conditions of this RFA. Applicants will not be allowed to change their budgets once submitted to DHHS, unless the POC specifically requests, in writing, budget changes. Budgets may be modified as required by DHHS or in agreement between DHHS and the Applicant after the Intent to Subaward is announced. Applicants should not rely on budget changes or modifications in submitting their proposed budget, but should be able to perform the program activities consistent with their budget.

If an Applicant has or has prepared a cost allocation plan for this subaward, it may submit it along with the Application.

If Applicants plan to charge indirect costs other than through a cost allocation plan, Applicants thus must provide one of the following along with their budget: 1) A current federally-approved indirect cost rate agreement; 2) A currently approved indirect cost rate agreement with DHHS; or, 3) A calculation of *de minimis* indirect costs consistent with federal rules. DHHS may provide a calculator to aid programs in calculating *de minimis* indirect costs, upon request.

Indirect costs and cost allocation plans may also be negotiated after the Intent to Subaward. As consistent with law, Applicants may voluntarily opt to take a lower indirect rate than their approved agreement, or indirect cost calculation, allows.

Applicants must use the budget template in the application to complete budgets for each component for which funding is requested. Applicants must provide calculations to accompany the budget explanation.

PROPOSED PERFORMANCE OUTCOMES

Applicants must provide 2021-22 grant year performance outcomes and proposed 2023-2024 grant year performance outcomes using the template provided in the application. HMIS Leads can assist with the returns to homelessness calculations.

4.5. Additional Information

The following items must be included:

- 4.5.1. Performance Reports for July 1, 2021 to June 30, 2022 from HMIS or a comparable database for each component, which funding is requested.

For example, if funding is requested for street outreach and emergency shelter, the Applicant would submit two reports, one for street outreach and one for emergency shelter.

- 4.5.2. Signed Verification of Participation in the Continuum of Care.
- 4.5.3. List of current Board of Directors, including phone numbers, email addresses, and titles.
- 4.5.4. Copy of the Applicant's most recent external fiscal audit.
- 4.5.6. Current certification from the Nebraska Secretary of State or print out of active state from: <https://goo.gl/cXOFX>.
- 4.5.7. Indirect cost rate agreement (if applicable).
- 4.5.8. Direct cost allocation (if applicable). Include sufficient documentation to demonstrate that costs were properly allocated.
- 4.5.9. Applicant's organizational chart.

5. TERMS

Applicants must be aware of the following terms when submitting their Applications. These terms will be included in the resulting Subaward between the parties, as well.

5.1. Addenda

The following Addenda will be incorporated into any Subaward with a selected Applicant. They are available online at the DHHS Website:

- Addendum A - DHHS Standard Terms – Subawards
- Addendum C - DHHS Business Associate Agreement Provisions

DHHS reserves the right to amend these terms at any time during the RFA; to negotiate the terms with selected Applicants; to amend or change these terms for any subsequent Subaward signed and executed by the parties; or any combination of the above. Terms required by federal or state law will not be negotiated, and if an Applicant cannot agree to these terms, DHHS may withdraw or modify the Intent to Subaward and take any of the actions set forth herein.

5.2. Budget Changes

The final Subaward may contain terms to allow a Subrecipient to modify a budget, with or without approval from DHHS. Applicants should not, however, rely on this when submitting budgets.

5.3. Direct Costs

Under this Subaward, DHHS shall only pay for actual and allowable costs (as defined in this section) incurred during the Period of Performance.

To be allowable, all costs must be:

- Necessary for the performance of the Subaward activities;
- Reasonable, as provided in 2 CFR § 200.404 or 45 CFR § 75.404;
- Allocable to the federal award, as provided in 2 CFR § 200.405 or 45 CFR § 75.405;
- Consistent with all other requirements of the Cost Principles in 2 CFR § 200 Subpart E or 45 CFR § 75 Subpart E; and,
- Consistent with all other law, regulation, policy, or other requirements applicable to the state or federal funds involved.

To be actual, all costs must be finalized and spent by the appropriate dates set forth in the Subaward.

Particular Federal Funding Agencies may have additional requirements and stipulations regarding allowable costs under that particular funding.

Applicants should be aware that direct personnel costs must be consistent with 45 CFR § 75.430 or 2 CFR § 200.430, as applicable. These costs must be able to be backed by sufficient documentation, or

must be shown to be allocable to the award via an alternative, allowable method, such as a random moment time study.

5.4. Indirect Costs

Federal law defines indirect costs as “costs incurred for a common or joint purpose benefitting more than one cost objective, and not readily assignable to the cost objectives specifically benefitted, without effort disproportionate to the results achieved.” 2 CFR § 200.56 and 45 CFR § 75.2. All indirect costs may only be paid if they are consistent with the UGG or HHS GG, as applicable.

As provided in 2 CFR § 200.414 and 45 CFR § 75.414, indirect costs may only be paid from a federal grant if paid through a federally-approved rate or a rate negotiated between DHHS and the Applicant.

If the Applicant has never had a federally-approved indirect rate, it may charge indirect costs as consistent with the federal rules for de minimis indirect costs.

Cost Allocation plans may set forth a direct allocation of all costs under a subaward, or may allocate only a portion of those costs along with an indirect rate. Subrecipients may not, however, charge items as direct costs and also as indirect costs.

5.5. Program Income

Any revenue generated by the Subaward is Program Income (see definition in 2 CFR § 200.80 or 45 CFR § 75.2). Program Income requires an accounting of its use and must be handled in accordance with 2 CFR § 200.307 or 45 CFR § 75.307. As per the Notice of Award for the federal funds involved in this RFA or from other regulation, all program income generated by the Subawards awarded as a result of this RFA must be handled under the addition method, Please see the regulations cited above for more detail.

5.6. Records Retention

In addition to any other requirements set forth in this RFA or the resulting Grant, the Grantee must comply with the following:

- 5.6.1. All records pertaining to each fiscal year of NHAP funds must be retained for the greater of 5 years or the period specified below. Copies made by microfilming, photocopying, or similar methods may be substituted for the original records.
- 5.6.2. Documentation of each program participant's qualification as a family or individual at risk of homelessness or as a homeless family or individual and other program participant records must be retained for 5 years after the expenditure of all funds from the grant under which the program participant was served.

5.7. Faith-Based Activities

In addition to any other requirements set forth in this RFA or the resulting Grant, the Grantee must comply with the following terms:

- 5.7.1. Organizations that are religious or faith-based are eligible, on the same basis as any other organization, to receive NHAP funds. Neither the Federal Government nor a State or local government receiving funds under NHAP shall discriminate against an organization on the basis of the organization's religious character or affiliation.
- 5.7.2. Organizations that are directly funded under the NHAP program may not engage in inherently religious activities, such as worship, religious instruction, or proselytization as part of the programs or services funded under NHAP. If an organization conducts these activities, the activities must be offered separately, in time or location, from the programs or services funded under NHAP, and the participation must be voluntary for program participants.
- 5.7.3. Any religious organization that receives NHAP funds retains its independence from Federal, State, and local governments. The organization may continue to carry out its mission, including the definition, practice, and expression of its religious beliefs, provided that the religious organization does not use direct NHAP funds to support any inherently

religious activities, such as worship, religious instruction, or proselytization. Among other things, faith-based organizations may use space in their facilities to provide NHAP-funded services, without removing religious art, icons, scriptures, or other religious symbols. In addition, an NHAP-funded religious organization retains its authority over its internal governance, and the organization may retain religious terms in its organization's name, select its board members on a religious basis, and include religious references in its organization's mission statements and other governing documents.

- 5.7.4. An organization that receives NHAP funds shall not, in providing NHAP assistance, discriminate against a program participant or prospective program participant on the basis of religion or religious belief.
- 5.7.5. NHAP funds may not be used for the rehabilitation of structures to the extent that those structures are used for inherently religious activities. NHAP funds may be used for the rehabilitation of structures only to the extent that those structures are used for conducting eligible activities under the NHAP program. Where a structure is used for both eligible and inherently religious activities, NHAP funds may not exceed the cost of those portions of the rehabilitation that are attributable to eligible activities in accordance with the cost accounting requirements applicable to NHAP funds. Sanctuaries, chapels, or other rooms that an NHAP-funded religious congregation uses as its principal place of worship, however, are ineligible for funded improvements under the program. Disposition of real property after the term of the grant or any change in use of the property during the term of the grant, is subject to government-wide regulations governing real property disposition (see 2 CFR §§ 200 et seq.).
- 5.7.6. If the recipient or a Grantee that is a local government voluntarily contributes its own funds to supplement federally funded activities, the recipient or Grantee has the option to segregate the Federal funds or commingle them. However, if the funds are commingled, this section applies to all of the commingled funds.

6. GLOSSARY OF TERMS

All terms shall have the meaning as set forth in 2 CFR §§ 200 et seq. or 45 CFR §§ 75 et seq. unless otherwise specifically set forth herein.

Agent/Representative: A person authorized to act on behalf of another.

Amend: To alter or change by adding, subtracting, or substituting.

Amendment: A written correction or alteration to a document.

Applicant: Non-Federal Entity that has applied for funding under this RFA.

Application: The written proposal submitted by the Applicant applying for funding under this RFA, which is composed of Forms 1 through 5.

Application Due Date: The date the RFA must be submitted to DHHS, and if not submitted by that time, rejected.

DHHS Website: www.dhhs.ne.gov.

Evaluation: The process of examining an Applicant after opening to determine the Applicant's responsibility, responsiveness to requirements, and to ascertain other characteristics of the Application that relate to determination of the successful award.

Evaluation Committee: Committee(s) appointed by DHHS that advises and assists DHHS in the evaluation of Applications.

Evaluator: An individual on the Evaluation Committee who advises and assists in the evaluation of Applications.

HHS Grants Guidance ("HHSGG"): The regulations codified at 45 CFR §§ 75 et seq., a re-codified version of the UGG, which provide the general administrative requirements for grant funding flowing down from the federal Department of Health and Human Services. See also Uniform Grant Guidance.

Intent to Subaward: A document noting the results of the RFA evaluation process, and identified any identified Applicant(s) with whom DHHS intends to award federal funds, but not a binding agreement with any promise to award.

Mainstream Benefits: Types of program assistance benefits that program participants can enroll in to obtain housing stability, such as Medicaid, Supplemental Nutrition Assistance Program (SNAP), Women, Infants, and Children (WIC), Social Security Disability Insurance (SSDI), Supplemental Security Income (SSI), Temporary Assistance for Needy Families (TANF), and Child and Adult Care Food Program (CACFP).

Mandatory/Must: Required, compulsory, or obligatory.

May: Discretionary, permitted; used to express possibility.

Must: See Mandatory/Must and Shall/Will/Must.

Non-Responsive: When an Application does not meet the minimum requirements of this RFA.

Point of Contact ("POC"): The person designated to receive communications and to communicate.

Request for Applications ("RFA"): Written solicitation of competitive applications for federal grant funding.

Shall/Will/Must: An order/command; mandatory.

Should: Expected; suggested, but not necessarily mandatory.

Subaward: In addition to the definition in 2 CFR § 200.92 and 45 CFR § 75.2, Subaward means the Grant Agreement executed, pursuant to the terms of the RFA, with the Non-Federal Entity.

Subrecipient: In addition to the definition in 2 CFR § 200.93 and 45 CFR § 75.2, Subrecipient means the Non-Federal Entity that has executed a Subaward with DHHS.

Uniform Grants Guidance (“UGG”): The regulations codified at 2 CFR §§ 200 et seq., which provide the general administrative requirements for grant funding flowing down from the federal government. See also HHS Grants Guidance.

Will: See Shall/Will/Must.

FORM 1 – APPLICATION COVER SHEET

Instructions: This form must be signed and returned, along with the application materials, before the Application Due Date, to the POC or designated email address, as applicable.

RFA #	RELEASE DATE
5961	FEBRUARY 17, 2023
APPLICATION DUE DATE	POINT OF CONTACT
MARCH 17, 2023	DHHS.Grants@nebraska.gov

CERTIFICATION AND GUARANTEE OF COMPLIANCE

By signing this Application Cover Sheet, the Applicant guarantees compliance with the provisions stated in this Request for Application and certifies that all information contained in this Application is accurate. This Application is submitted pursuant to the terms of the RFA, and if the Applicant is awarded funding, it will be incorporated into the Subaward between the parties. I understand that if anything in this Application conflicts with the RFA or with the subsequent Subaward, the Subaward and RFA shall govern as set forth in the Subaward.

ORGANIZATION*:

ORGANIZATION UEI NUMBER: _____ PARENT UEI (IF APPLICABLE): _____

COMPLETE ADDRESS (INCLUDE ZIP+4)

CONGRESSIONAL DISTRICT: _____

TELEPHONE NUMBER: _____ EMAIL ADDRESS: _____

____ I CERTIFY THAT THIS ORGANIZATION IS AN "ELIGIBLE ORGANIZATION" AS DEFINED BY THIS RFA.

____ I CERTIFY THAT THIS ORGANIZATION IS NOT PRESENTLY DEBARRED OR SUSPENDED.

SIGNATURE:

TYPED NAME & TITLE OF SIGNER: _____

**Name must match UEI Number.*

FORM 2 – APPLICANT’S ORGANIZATIONAL OVERVIEW

APPLICANT INFORMATION:

Applicant’s Legal Name:

Applicant’s Mailing Address, including Zip+4:

Applicant’s Website:

Applicant’s Federal TIN/SSN:

Applicant’s UEI Number:

Applicant’s Fiscal Year Start Date: End Date:

Executive Director/President’s Name:

Executive Director/President’s Email:

Board Chair/President’s Name:

Board Chair/President’s Email:

Program Contact’s Name:

Program Contact’s Title:

Program Contact’s Email:

Program Contact’s Phone:

PROGRAM TYPE – check all that apply:

☐ Emergency Shelter

☐ Transitional Housing

☐ Street Outreach

☐ Homelessness Prevention

☐ Rapid Rehousing

☐ HMIS/Data Collection

BED TYPE (for shelters only) – select *one*:

POPULATION SERVED – select *all* that apply:

☐ Single adult males

☐ Single adult females

☐ Couples with children

☐ Couples without children

☐ Adult males with children

☐ Adult females with children

☐ Unaccompanied young males

☐ Unaccompanied young female

Counties Your Agency Serves in this Continuum of Care Region:

Enter **all** counties your agency serves **in this Region**. Do NOT include counties outside of this Region, as the submission of this application is an acknowledgement that the agency will not request reimbursement for clients in counties outside of the Continuum of Care (CoC). If the agency serves counties in multiple CoC regions, another application must be submitted for each CoC Region (see next question) to provide NHAP billable services to the agency's entire population):

Continuum of Care Region:

Note: If services will be provided in more than one Region, a **separate** application must be completed for each Region:

Summary of Federal Grants Experience:

Provide a description of the Applicant's previous experience with receiving federal funds. This shall include, but not be limited to, experience receiving federal funds as a recipient or a subrecipient. Applicants should describe and demonstrate knowledge of the Uniform Grant Guidance or the HHS Grants Guidance (as applicable), as well as any specific experience with the particular federal program and funding source that funds this Request For Application.

Summary of Programmatic Experience:

Provide a description of the Applicant's experience with the type of programming or work contained in the Project Description, or other relevant work.

Personnel and Management:

Identify individuals employed by Applicant, on its Board of Directors, or otherwise affiliated with Applicant, who have a demonstrated knowledge or experience with federal grants, the Uniform Grant Guidance or the HHS Grants Guidance, programmatic experience, or other relevant experience.

Agreements Terminated or Costs Disallowed:

Provide a summary of any agreements executed within the last five (5) years with federal awarding agencies or pass-through entities (either as grant agreements, cooperative agreements, subawards, or contracts) that:

- Were terminated for cause; or
- Where Specific Conditions were placed on Applicant (see 2 CFR § 200.207 or 45 CFR § 75.207).

Note: If an Applicant has been disbarred by the United States Federal government, it is not eligible to receive funding under this RFA.

FORM 3 – APPLICANT’S WORK PLAN

1. **Responses to the criteria outlined in Section 4.3 should be provided on this form.** Describe your agency’s participation on your local/regional/state Continuum of Care (CoC) committee or sub-work group/subcommittee meetings, and homeless advocacy meetings (e.g., 10-year Plan to End Homelessness meetings, Nebraska Commission on Housing and Homelessness (NCCH) Commission meetings, etc.). Include dates and name(s) of agency staff who participated and any leadership roles (e.g. committee or subcommittee officer/convener/lead). In addition, provide any agency participation in special events designed to end or prevent homelessness, including dates and name(s) of agency staff who participated and any leadership roles pertaining to the special event (Project Homeless Connect, Stand Down, etc.).
2. Describe your agency’s participation in the Coordinated Entry System to promote the “no wrong door” approach to ensure streamlined accessibility to permanent housing programs and self-sufficiency for program participants. In addition, identify if the agency is either a public access door or other entry point. If not, explain how the agency refers program participants to the applicable agency for placement on the By-Name list for Permanent Supportive Housing/Rapid Rehousing. Provide narrative regarding how and when the agency utilizes the standardized assessment tools adopted by the CoC to determine the needs and prioritization of the program participants. Detail should be included regarding how confidentiality of program participants who are fleeing domestic violence will be maintained, as per the Violence Against Women Act (VAWA).
3. Describe your agency’s new strategies for supporting and improving the self-sufficiency of those who are experiencing or at risk of experiencing homelessness (e.g., job training, ESL classes, budgeting assistance, Rent Wise, life skills, etc.). Provide information on case management and/or other services provided after the program participant has secured permanent housing. Include a description of your agency’s process in linking clients you serve with the SOAR designated agency in your local CoC as applicable.
4. Describe your agency’s new strategies for coordinating with [mainstream services](#) (e.g., regular meetings, cultivation of specific contacts at other agencies, etc.) and connecting program participants with other services. Provide a description of how mainstream funding resources are utilized in conjunction with NHAP funds to provide financial assistance to program participants in order to serve the greatest number of individuals with limited funding. In addition, provide an explanation regarding how the agency utilizes diversion processes to prevent individuals from entering the homeless system.
5. Describe any changes your agency has made in implementing the Housing First approach in the past year. Provide an honest assessment, which recognizes your agency’s challenges in fully adopting Housing First best practices. In your assessment, consider your agency’s policies, length of stay, type of services, targeted populations, and staff training opportunities. Also consider how your agency involves program participants in planning, policies, processes, and procedures.
6. Describe any changes to your agency’s strategies, policies, and practices for monitoring and improving the accuracy and quality of program data (e.g., regular data reports, data checking by assigned staff, data report review by Director and/or Board, etc.).

FORM 4 – APPLICANT’S BUDGET AND PROPOSED PERFORMANCE OUTCOMES

Funding Request:

The total NHAP Funding Request should equal the combined total of the NHAP funding request for each service.

Total **2022-2023** NHAP Funding Award:

- **2022-2023** NHAP Program type funded:– *check all that applied:*

☐ Street Outreach

☐ Emergency Shelter

☐ Transitional Shelter

Enter the number of ESG eligible units funded by NHAP:

☐ Homelessness Prevention

☐ Rapid Rehousing

☐ HMIS

Total **2023-2024** NHAP Funding Request:

- **2023-2024** NHAP Funding Request is for the following Program Type – *check all that apply:*

☐ Street Outreach

☐ Emergency Shelter

☐ Transitional Shelter

Enter the number of ESG eligible units funded by NHAP:

☐ Homelessness Prevention

☐ Rapid Rehousing

☐ HMIS

- Ratio of NHAP requested funding to Agency's overall Fiscal Budget for NHAP Related Services
FY 2023-2024:

A. Amount of NHAP Funds Requested:	B. Agency's Total Budget for NHAP Related Services FY 2023-2024	C. $A \div B = C$ (%)
<input type="text" value="Enter amount"/>	<input type="text" value="Enter amount"/>	<input type="text" value="0%"/>

Agency Name:				
FY 2023-24 NHAP PROPOSED BUDGET		NHAP REQUEST	OTHER SOURCES	GRAND TOTAL
STREET OUTREACH	Essential Services			\$0.00
	Indirect Cost*			\$0.00
	SUBTOTAL	\$0.00	\$0.00	\$0.00
SHELTER	Essential Services			\$0.00
	Operations (including minor repairs)			\$0.00
	Indirect Cost*			\$0.00
	SUBTOTAL	\$0.00	\$0.00	\$0.00
HOMELESSNESS PREVENTION	Services- Housing R & S			\$0.00
	Financial Assistance- Housing R & S			\$0.00
	Rent Assistance -Tenant-Based			\$0.00
	Rent Assistance -Project-Based			\$0.00
	Indirect Costs*			\$0.00
	SUBTOTAL	\$0.00	\$0.00	\$0.00
RAPID RE-HOUSING	Services- Housing R & S			\$0.00
	Financial Assistance- Housing R & S			\$0.00
	Rent Assistance -Tenant-Based			\$0.00
	Rent Assistance -Project-Based			\$0.00
	Indirect Costs*			\$0.00
	SUBTOTAL	\$0.00	\$0.00	\$0.00
HMIS	Direct Costs			\$0.00
	Indirect Costs*			\$0.00
	SUBTOTAL	\$0.00	\$0.00	\$0.00
GRAND TOTAL		\$0.00	\$0.00	\$0.00

***To be reimbursed for Indirect Costs, an approved Indirect Cost Rate Proposal must be on file at DHHS or the de minimus rate of 10% must be used.**

REQUEST FOR FUNDING

Under the detailed budget narratives on the following pages provide clear, complete, and accurate information to support requested funding and demonstrate performance. All requested information needs to be completed for each component proposed. For any section that should not be considered for funding (e.g., Street Outreach project) must be indicated by a "Not Applicable" statement or a strike through the page(s).

DEMONSTRATED PERFORMANCE

As part of the HEARTH Implementation Act, performance measures are to be used to demonstrate outcomes. These outcomes in turn measure program progress in meeting the defined goals and objectives. The primary goal of NHAP is ensuring that homelessness is brief, rare and only a one-time occurrence.

HUD requires all Emergency Solutions Grant subrecipients to enter required HUD data elements into the Homeless Management Information System (HMIS) or a comparable database system. All applicants who have previously received NHAP funding need to complete the HMIS Data Performance information or complete comparable data (i.e., Annual Performance Report (APR), Consolidated Annual Performance and Evaluation Report (CAPER), or Osnum).

INCREASED JOBS, INCOME, AND SELF-SUFFICIENCY DATA

In this section, provide the percentage of clients who have sustained or increased the amount of income types throughout their enrollment, as well as the percentage of clients who have increased their level of education at the time of exit.

For Bitfocus – Clarity HMIS users, utilize the “*OUTS-102-Performance Monitoring*” report to complete the tables below.

****IMPORTANT:** The OUTS-102 report is available to active Clarity users. If an applicant needs assistance with this report, they must contact their HMIS System Administrator as soon as possible, and no later than two (2) weeks before this Request For Application is due to the NHAP office.**

July 1, 2020 – June 30, 2021

Increase jobs, income, and self sufficiency		
% of adults with increased or sustained employment income	%	
% of adults with increased or sustained other cash income	%	
% of adults with increased or sustained mainstream on-cash benefits	%	
% of persons with improved education	%	

July 1, 2021 – June 30, 2022

Increase jobs, income, and self sufficiency		
% of adults with increased or sustained employment income	%	
% of adults with increased or sustained other cash income	%	
% of adults with increased or sustained mainstream on-cash benefits	%	
% of persons with improved education	%	

STREET OUTREACH BUDGET AND SERVICE DESCRIPTION

Funding Request

2021-2022 NHAP funding for street outreach:

2021-2022 NHAP funding for street outreach remaining as of July 1, 2022:

2022-2023 NHAP funding for street outreach:

Requested 2023-2024 NHAP funding for street outreach:

Provide an explanation for any increase or decrease in requested street outreach funding:

Street Outreach Detailed Budget

Street Outreach (SO) Services	NHAP Request	Other Funds	Grand Total
Engagement Activities	Enter amount	Enter amount	Enter amount
Case Management	Enter amount	Enter amount	Enter amount
Emergency Health Services (licensed provider)	Enter amount	Enter amount	Enter amount
Emergency Mental Health Services (licensed provider)	Enter amount	Enter amount	Enter amount
Transportation	Enter amount	Enter amount	Enter amount
SO Services Direct Cost Allocation (if applicable)	Enter amount	Enter amount	Enter amount
SERVICES SUBTOTAL	Enter amount	Enter amount	Enter amount

Indirect Cost Rate (if applicable): Rate %.	Enter amount	ENTER	Enter amount
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SO TOTAL	Enter amount	Enter amount	Enter amount
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Street Outreach narrative: Provide a narrative description of the activities being proposed and a detailed description of how each line item was calculated (e.g., breakdown of personnel costs, service cost calculations, methods of determining cost allocation percentages, detail of operational expenses, etc.). Provide the total amounts, description, and name of funding source of other funds utilized to support the agency's street outreach efforts. Describe whether the funding is confirmed or pending. If "Other Funds" is left blank or has a zero provide detail as to why no other funding is sought or received. Points will be deducted if the service narrative does not contain sufficient budget breakdown detail to replicate the calculated budget totals.

Enter Explanation

STREET OUTREACH PERFORMANCE

Populations Served 7/1/21 to 6/30/22

Unduplicated Total Number of Program Participants Served with Street Outreach	A. All Leavers #	B. Outcome Measures		C. Percent Achieved
				B÷A=C
		Exits to Permanent Housing Destination		
		Unduplicated Number Placed in Permanent Housing Destinations at Program Exit	#	%
		*Supporting Documentation: APR/CAPER Q 23 and/or b		

***Supporting documentation has to be in the format of printouts from a HMIS or comparable database. ONLY provide the data report (APR/CAPER/Osnum) that supports the data that is being requested. Submission of excessive data will be disregarded and points may be deducted.**

- Unduplicated count of individuals served from 7/1/21 to 6/30/22: #
- From the NHAP 2021-2022 Application, how many unduplicated individuals were proposed to be served from 7/1/21 to 6/30/22: #
- Unduplicated count of individuals proposing to serve from 7/1/23 to 6/30/24: #
- Unduplicated count of households served from 7/1/21 to 6/30/22: #
- From the NHAP 2021-2022 Application, how many unduplicated households were proposed to be served from 7/1/22 to 6/30/22: #
- Unduplicated count of households proposing to serve from 7/1/23 to 6/30/24: #

Enter Explanation

RETURNS TO HOMELESSNESS DATA – STREET OUTREACH

For Bitfocus – Clarity

HMIS users, utilize the “OUTS-205 Program Recidivism ” report to complete the tables below.

****IMPORTANT:** The OUTS-205 report must be generated by the HMIS System Administrator. To allow adequate time for this report to be generated, applicants must contact their HMIS System Administrator as soon as possible, and no later than two (2) weeks before this Request For Application is due to the NHAP office.**

July 1, 2020 – June 30, 2021

Street Outreach	Number of Clients
Number of clients who exited within date range	
Number of clients who exited to permanent destinations	
Number of clients returning to homelessness	
Average number of days from program exit to re-entry	

July 1, 2021 – June 30, 2022

Street Outreach	Number of Clients
Number of clients who exited within date range	
Number of clients who exited to permanent destinations	
Number of clients returning to homelessness	
Average number of days from program exit to re-entry	

HMIS/DV DATA ENTRY PERFORMANCE – STREET OUTREACH

HUD requires all ESG grantees to enter required HUD data elements into HMIS or a comparable system. All applicants need to complete the performance section for HMIS/DV Data Entry.

MISSING HUD REQUIRED DATA

To calculate the missing/null data percent, add together the percentage of error rates for the HUD required data quality elements (Personally Identifying Information, Universal Data Elements, Income and Housing Data Quality, and Chronic Homelessness) entry fields to determine a total percentage. Next, divide this total by the number of data elements (18) to determine the percentage of missing data fields for each activity type funded by NHAP.

NOTE: Points will NOT be deducted for missing SSN information for victims of DV, SA, or Stalking (per VAWA regulations) or for immigrants who are not US citizens or nationals. Services cannot be withheld when necessary to protect life of safety.

PROGRAM NAME	% MISSING DATA FIELDS
Street Outreach	<input type="text"/>

For agencies with data error rates for SSN due to VAWA or immigration status, provide the percentage of error rates and explanation as needed.

Enter Explanation

EMERGENCY SHELTER BUDGET AND SERVICE DESCRIPTION

Funding Request

2021-2022 NHAP funding for emergency shelter:

2021-2022 NHAP funding for emergency shelter remaining as of July 1, 2022:

2022-2023 NHAP funding for emergency shelter:

Requested 2023-2024 NHAP funding for emergency shelter:

Provide a brief explanation for any increase or decrease in requested shelter funding:

Enter Explanation

Emergency Shelter Detailed Budget

Emergency Shelter (ES) Essential Services	NHAP Request	Other Funds	Grand Total
Case Management	Enter amount	Enter amount	Enter amount
Child Care (licensed)	Enter amount	Enter amount	Enter amount
Education Services	Enter amount	Enter amount	Enter amount
Employment Assistance and Job Training	Enter amount	Enter amount	Enter amount
Outpatient Health Services	Enter amount	Enter amount	Enter amount
Outpatient Substance Abuse Treatment (licensed)	Enter amount	Enter amount	Enter amount
Outpatient Mental Health Services (licensed)	Enter amount	Enter amount	Enter amount
Transportation	Enter amount	Enter amount	Enter amount
Life Skills Training	Enter amount	Enter amount	Enter amount
ES Services Direct Cost Allocation (If applicable)	Enter amount	Enter amount	Enter amount
SUBTOTAL SERVICES	Enter amount	Enter amount	Enter amount

Emergency Shelter Operations	NHAP Request	Other Funds	Grand Total
Emergency Shelter Operations	Enter amount	Enter amount	Enter amount
Hotel/Motel Vouchers (if shelter is unavailable)	Enter amount	Enter amount	Enter amount
SUBTOTAL OPERATIONS	Enter amount	Enter amount	Enter amount

Indirect Cost Rate (if applicable): Rate %.	Enter amount	Enter amount	Enter amount
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ES TOTAL	Enter amount	Enter amount	Enter amount
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Emergency Shelter narrative: Provide a narrative description of activity being proposed and a detailed description of how each line item was calculated (e.g., breakdown of personnel costs, service cost calculations, methods of determining cost allocation percentages, detail of operational expenses, etc.). Provide the total amounts, description, and name of funding source of other funds utilized to support the agency's emergency shelter activities. Describe whether the funding is confirmed or pending. If "Other Funds" is left blank or has a zero provide detail as to why no other funding is sought or received. Points will be deducted if the service narrative does not contain sufficient budget breakdown detail to replicate the calculated budget totals.

Enter Explanation

EMERGENCY SHELTER PERFORMANCE

Populations Served 7/1/21 to 6/30/22				
Unduplicated Total Number of Program Participants Served with Emergency Shelter	A. All Leavers #	B. Outcome Measures		C. Percent Achieved
				B÷A=C
		Exits to Permanent Housing Destination		
		Unduplicated Number Placed in Permanent Housing Destinations at Program Exit	#	%
		**Supporting Documentation: APR/CAPER Q 23 and/or b		

***Supporting documentation has to be in the format of printouts from a HMIS or a comparable database. ONLY provide the data report (APR) that supports the data that is being requested. Submission of excessive data will be disregarded and points may be deducted.**

- Unduplicated count of individuals served from 7/1/21 to 6/30/22: #
- From the NHAP 2021-2022 Application, how many unduplicated individuals were proposed to be served from 7/1/22 to 6/30/23: #
- Unduplicated count of individuals proposing to serve from 7/1/23 to 6/30/24: #
- Unduplicated count of households served from 7/1/21 to 6/30/22: #
- From the NHAP 2021-2022 Application, how many unduplicated households were proposed to be served from 7/1/22 to 6/30/23: #
- Unduplicated count of households proposing to serve from 7/1/23 to 6/30/24: #
- Average length of stay of Households from 7/1/21 to 6/30/22: Enter amount
- Projected average length of stay of Households from 7/1/23 to 6/30/24: Enter amount
- Utilization rate for shelter beds from the 2022 Point-in-Time count: Enter amount
- Projected utilization rate for shelter beds from the 2023 Point-in Time count: Enter amount

Agencies must provide information for changes in numbers served between the last and the proposed program year. Provide any program specific information which may result in divergences in standard performance outcomes such as type of service, length of stay, targeted populations, etc., if applicable.

Enter Explanation

RETURNS TO HOMELESSNESS DATA – EMERGENCY SHELTER

Bitfocus – Clarity Users Only:

HMIS users should utilize the “*OUTS-205 Program Recidivism*” report to complete the tables below.

****IMPORTANT:** The OUTS-205 report must be generated by the HMIS System Administrator. To allow adequate time for this report to be generated, applicants must contact their HMIS System Administrator as soon as possible, and no later than two (2) weeks before this Request For Application is due to the NHAP office.**

July 1, 2020 – June 30, 2021

Emergency Shelter	Number of Clients
Number of clients who exited within date range	
Number of clients who exited to permanent destinations	
Number of clients returning to homelessness	
Average number of days from program exit to re-entry	

July 1, 2021 – June 30, 2022

Emergency Shelter	Number of Clients
Number of clients who exited within date range	
Number of clients who exited to permanent destinations	
Number of clients returning to homelessness	
Average number of days from program exit to re-entry	

Osniun System Users Only:

Domestic Violence Providers must complete the following table per the results of the national domestic violence client survey. If the applicant did not utilize the national client survey, indicate that data was not collected.

Responses to Survey Question 1: After working with an advocate I now know more ways to plan for my safety.

July 1, 2020 – June 30, 2021

Total number of clients served under Emergency Shelter	
Percentage of clients served that responded “Yes”	
Percentage of clients served that responded “No”	
Percentage of clients service that did not respond to survey	

July 1, 2021 – June 30, 2022

Total number of clients served under Emergency Shelter	
Percentage of clients served that responded “Yes”	
Percentage of clients served that responded “No”	
Percentage of clients service that did not respond to survey	

Responses to Survey Question 2: After working with an advocate I now know more about community resources.

July 1, 2020 – June 30, 2021

Total number of clients served under Emergency Shelter	
Percentage of clients served that responded “Yes”	
Percentage of clients served that responded “No”	
Percentage of clients service that did not respond to survey	

July 1, 2021 – June 30, 2022

Total number of clients served under Emergency Shelter	
Percentage of clients served that responded “Yes”	
Percentage of clients served that responded “No”	
Percentage of clients service that did not respond to survey	

HMIS/DV DATA ENTRY PERFORMANCE – EMERGENCY SHELTER

HUD requires all ESG grantees to enter required HUD data elements into HMIS or a comparable system. All applicants need to complete the performance section for HMIS/DV Data Entry.

MISSING HUD REQUIRED DATA

Add together the percentages of error rates for the HUD required data quality elements (Personally Identifying Information, Universal Data Elements, Income and Housing Data Quality, and Chronic Homelessness) entry fields to determine a total percentage. Next, divide this total by the number of data elements (18) to determine the percentage of missing data fields for each activity type funded by NHAP.

NOTE: Points will NOT be deducted for missing SSN information for victims of DV, SA, or Stalking (per VAWA regulations) or for immigrants who are not US citizens or nationals. Services cannot be withheld when necessary to protect life of safety.

PROGRAM NAME	% MISSING DATA FIELDS
Shelter/Transitional Housing	<input type="text"/>

For agencies with data error rates for SSN due to VAWA or immigration status, provide the percentage of error rates and explanation as needed.

Enter Explanation

HOMELESSNESS PREVENTION BUDGET AND SERVICE PERFORMANCE

Funding Request

2021-2022 NHAP funding for homelessness prevention:

2021-2022 NHAP funding for homeless prevention remaining as of July 1, 2022:

2022-2023 NHAP funding for homelessness prevention:

Requested 2023-2024 NHAP funding for homelessness prevention:

Provide a brief explanation for any increase or decrease in requested homelessness prevention funding:

Enter Explanation

Homelessness Prevention Detailed Budget

Homelessness Prevention (HP) Services	NHAP	Other Funds	Grand Total
Housing Search and Placement	Enter amount	Enter amount	Enter amount
Housing Stability Case Management	Enter amount	Enter amount	Enter amount
Transportation	Enter amount	Enter amount	Enter amount
Mediation	Enter amount	Enter amount	Enter amount
Credit Repair	Enter amount	Enter amount	Enter amount
HP Services Direct Cost Allocation (if applicable)	Enter amount	Enter amount	Enter amount
SUBTOTAL SERVICES	Enter amount	Enter amount	Enter amount

Homelessness Prevention Financial Assistance	NHAP	Other Funds	Grand Total
Rental Application Fees	Enter amount	Enter amount	Enter amount
Security Deposits (up to 2 months' rent)	Enter amount	Enter amount	Enter amount
Last Month's Rent (up to 1 month)	Enter amount	Enter amount	Enter amount
Utility Deposits (gas, water, electric, sewage)	Enter amount	Enter amount	Enter amount
Utility Payment (gas, water, electric, sewage)	Enter amount	Enter amount	Enter amount
Moving Costs	Enter amount	Enter amount	Enter amount
SUBTOTAL FINANCIAL ASSISTANCE	Enter amount	Enter amount	Enter amount

Homelessness Prevention Rent Assistance	NHAP	Other Funds	Grand Total
Rental Assistance - Short-Term (≤ 3 months)	Enter amount	Enter amount	Enter amount
Rental Assistance - Medium-Term (> 3 mo. ≤ 24 mo.)	Enter amount	Enter amount	Enter amount
Rental Assistance - Rental Arrearage	Enter amount	Enter amount	Enter amount
SUBTOTAL RENT ASSISTANCE	Enter amount	Enter amount	Enter amount

Indirect Cost Rate (if applicable): Rate %.	Enter amount	Enter amount	Enter amount
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HP TOTAL	Enter amount	Enter amount	Enter amount
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Homelessness Prevention narrative: Provide a narrative description of activity being proposed and a detailed description of how each line item was calculated (e.g., breakdown of personnel costs, methods of determining cost allocation percentages, detail of operational expenses, etc.). Provide the total amounts, description, and name of funding source of other funds utilized to support the agency's homelessness prevention efforts. Describe whether the funding is confirmed or pending. If "Other Funds" is left blank or has a zero provide detail as to why no other funding is sought or received. Points will be deducted if the service narrative does not contain sufficient budget breakdown detail to replicate the calculated budget totals.

Enter Explanation

HOMELESSNESS PREVENTION PERFORMANCE

Populations Served 7/1/21 to 6/30/22				
Unduplicated Total Number of all of Homeless Individuals Served with Homelessness Prevention	A. All Leavers #	B. Outcome Measures		C. Percent Achieved $B \div A = C$
		Exits to Permanent Housing Destination		
		Unduplicated Number Placed in Permanent Housing Destinations at Program Exit	#	%
		**Supporting Documentation: APR/CAPER Q 23 and/or b		

***Supporting documentation has to be in the format of printouts from a HMIS or a comparable database. ONLY provide the data report (APR) that supports the data that is being requested. Submission of excessive data will be disregarded and points may be deducted.**

- Unduplicated count of individuals served from 7/1/21 to 6/30/22: #
- From the NHAP 2021-2022 Application, how many unduplicated individuals were proposed to be served from 7/1/22 to 6/30/23: #
- Unduplicated count of individuals proposing to serve from 7/1/23 to 6/30/24: #
- Unduplicated count of households served from 7/1/21 to 6/30/22: #
- From the NHAP 2021-2022 Application, how many unduplicated households were proposed to be served from 7/1/22 to 6/30/23: #
- Unduplicated count of households proposing to serve from 7/1/23 to 6/30/24: #

Enter Explanation

RETURNS TO HOMELESSNESS DATA – HOMELESS PREVENTION

Bitfocus – Clarity Users Only:

HMIS users should utilize the “*OUTS-205 Program Recidivism*” report to complete the tables below.

****IMPORTANT:** The OUTS-205 report must be generated by the HMIS System Administrator. To allow adequate time for this report to be generated, applicants must contact their HMIS System Administrator as soon as possible, and no later than two (2) weeks before this Request For Application is due to the NHAP office.**

July 1, 2020 – June 30, 2021

Homeless Prevention	Number of Clients
Number of clients who exited within date range	
Number of clients who exited to permanent destinations	
Number of clients returning to homelessness	
Average number of days from program exit to re-entry	

July 1, 2021 – June 30, 2022

Homeless Prevention	Number of Clients
Number of clients who exited within date range	
Number of clients who exited to permanent destinations	
Number of clients returning to homelessness	
Average number of days from program exit to re-entry	

Osniium System Users Only:

Domestic Violence Providers must complete the following table per the results of the national domestic violence client survey. If the applicant did not utilize the national client survey, indicate that data was not collected.

Responses to Survey Question 1: After working with an advocate I now know more ways to plan for my safety.

July 1, 2020 – June 30, 2021

Total number of clients served under Homeless Prevention	
Percentage of clients served that responded “Yes”	
Percentage of clients served that responded “No”	
Percentage of clients service that did not respond to survey	

July 1, 2021 – June 30, 2022

Total number of clients served under Homeless Prevention	
Percentage of clients served that responded “Yes”	
Percentage of clients served that responded “No”	
Percentage of clients service that did not respond to survey	

Responses to Survey Question 2: After working with an advocate I now know more about community resources.

July 1, 2020 – June 30, 2021

Total number of clients served under Homeless Prevention	
Percentage of clients served that responded "Yes"	
Percentage of clients served that responded "No"	
Percentage of clients service that did not respond to survey	

July 1, 2021 – June 30, 2022

Total number of clients served under Homeless Prevention	
Percentage of clients served that responded "Yes"	
Percentage of clients served that responded "No"	
Percentage of clients service that did not respond to survey	

HMIS/DV DATA ENTRY PERFORMANCE – HOMELESSNESS PREVENTION

HUD requires all ESG grantees to enter required HUD data elements into HMIS or a comparable system. All applicants need to complete the performance section for HMIS/DV Data Entry.

MISSING HUD REQUIRED DATA

Add together the percentages of error rates for the HUD required data quality elements (Personally Identifying Information, Universal Data Elements, Income and Housing Data Quality, and Chronic Homelessness) entry fields to determine a total percentage. Next, divide this total by the number of data elements (18) to determine the percentage of missing data fields for each activity type funded by NHAP.

NOTE: Points will NOT be deducted for missing SSN information for victims of DV, SA, or Stalking (per VAWA regulations) or for immigrants who are not US citizens or nationals. Services cannot be withheld when necessary to protect life of safety.

PROGRAM NAME	% MISSING DATA FIELDS
Homelessness Prevention	<input type="text"/>

For agencies with data error rates for SSN due to VAWA or immigration status, provide the percentage of error rates and explanation as needed.

Enter Explanation

RAPID REHOUSING

Funding Request

2021-2022 NHAP funding for rapid rehousing:

2021-2022 NHAP funding for rapid rehousing remaining as of July 1, 2022:

2022-2023 NHAP funding for rapid rehousing:

Requested 2023-2024 NHAP funding for rapid rehousing:

Provide a brief explanation for any increase or decrease in requested rapid rehousing funding:

Enter Explanation

Rapid Rehousing Detailed Budget

Rapid Rehousing (RRH) Services	NHAP Request	Other Funds	Grand Total
Housing Search and Placement	Enter amount	Enter amount	Enter amount
Housing Stability Case Management	Enter amount	Enter amount	Enter amount
Transportation	Enter amount	Enter amount	Enter amount
Mediation	Enter amount	Enter amount	Enter amount
Credit Repair	Enter amount	Enter amount	Enter amount
RRH Services Direct Cost Allocation (if applicable)	Enter amount	Enter amount	Enter amount
SUBTOTAL SERVICES	Enter amount	Enter amount	Enter amount

Rapid Rehousing Financial Assistance	NHAP Request	Other Funds	Grand Total
Rental Application Fees	Enter amount	Enter amount	Enter amount
Security Deposits (up to 2 months' rent)	Enter amount	Enter amount	Enter amount
Last Month's Rent (up to 1 month)	Enter amount	Enter amount	Enter amount
Utility Deposits (gas, water, electric, sewage)	Enter amount	Enter amount	Enter amount
Utility Payment (gas, water, electric, sewage)	Enter amount	Enter amount	Enter amount
Moving Costs	Enter amount	Enter amount	Enter amount
SUBTOTAL FINANCIAL ASSISTANCE	Enter amount	Enter amount	Enter amount

Rapid Rehousing Rent Assistance	NHAP Request	Other Funds	Grand Total
Rental Assistance - Short-Term (≤ 3 months)	Enter amount	Enter amount	Enter amount
Rental Assistance - Medium-Term (> 3 mo. ≤ 24 mo.)	Enter amount	Enter amount	Enter amount
Rental Assistance - Rental Arrearage	Enter amount	Enter amount	Enter amount
SUBTOTAL RENT ASSISTANCE	Enter amount	Enter amount	Enter amount

Indirect Cost Rate (if applicable): Rate %.	Enter amount	Enter amount	Enter amount
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RRH TOTAL	Enter amount	Enter amount	Enter amount
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Rapid Rehousing: Provide a narrative description of activity being proposed and a detailed description of how each line item was calculated (e.g., breakdown of personnel costs, methods of determining cost allocation percentages, detail of operational expenses, etc.). Provide the total amounts, description, and name of funding source of other funds utilized to support the agency's rapid rehousing services. Describe whether the funding is confirmed or pending. If "Other Funds" is left blank or has a zero provide detail as to why no other funding is sought or received. Points will be deducted if the service narrative does not contain sufficient budget breakdown detail to replicate the calculated budget totals.

Enter Explanation

RAPID REHOUSING PERFORMANCE

Populations Served 7/1/21 to 6/30/22				
Unduplicated Total Number of Program Participants Served with Rapid Rehousing	A. All Leavers #	B. Outcome Measures		C. Percent Achieved
				B÷A=C
		Exits to Permanent Housing Destination		
		Unduplicated Number Placed in Permanent Housing Destinations at Program Exit	#	%
		*Supporting Documentation: APR/CAPER Q 23 and/or b		

***Supporting documentation has to be in the format of printouts from an HMIS or a comparable database. ONLY provide the data report (APR) that supports the data that is being requested. Submission of excessive data will be disregarded and points may be deducted.**

- Unduplicated count of individuals served from 7/1/21 to 6/30/22: #
- From the NHAP 2021-2022 Application, how many unduplicated individuals were proposed to be served from 7/1/22 to 6/30/23: #
- Unduplicated count of individuals proposing to serve from 7/1/23 to 6/30/24: #
- Unduplicated count of households served from 7/1/21 to 6/30/22: #
- From the NHAP 2021-2022 Application, how many unduplicated households were proposed to be served from 7/1/21 to 6/30/22: #
- Unduplicated count of households proposing to serve from 7/1/23 to 6/30/24: #

Enter Explanation

RETURNS TO HOMELESSNESS DATA – RAPID REHOUSING

Bitfocus – Clarity Users Only:

HMIS users should utilize the “OUTS-205 Program Recidivism ” report to complete the tables below.

****IMPORTANT:** The OUTS-205 report must be generated by the HMIS System Administrator. To allow adequate time for this report to be generated, applicants must contact their HMIS System Administrator as soon as possible, and no later than two (2) weeks before this Request For Application is due to the NHAP office.**

July 1, 2020 – June 30, 2021

Rapid Rehousing	Number of Clients
Number of clients who exited within date range	
Number of clients who exited to permanent destinations	
Number of clients returning to homelessness	
Average number of days from program exit to re-entry	

July 1, 2021 – June 30, 2022

Rapid Rehousing	Number of Clients
Number of clients who exited within date range	
Number of clients who exited to permanent destinations	
Number of clients returning to homelessness	
Average number of days from program exit to re-entry	

Osniium System Users Only:

Domestic Violence Providers must complete the following table per the results of the national domestic violence client survey. If the applicant did not utilize the national client survey, indicate that data was not collected.

Responses to Survey Question 1: After working with an advocate I now know more ways to plan for my safety.

July 1, 2020 – June 30, 2021

Total number of clients served under Rapid Rehousing	
Percentage of clients served that responded “Yes”	
Percentage of clients served that responded “No”	
Percentage of clients service that did not respond to survey	

July 1, 2021 – June 30, 2022

Total number of clients served under Rapid Rehousing	
Percentage of clients served that responded “Yes”	
Percentage of clients served that responded “No”	
Percentage of clients service that did not respond to survey	

Responses to Survey Question 2: After working with an advocate I now know more about community resources.

July 1, 2020 – June 30, 2021

Total number of clients served under Rapid Rehousing	
Percentage of clients served that responded "Yes"	
Percentage of clients served that responded "No"	
Percentage of clients service that did not respond to survey	

July 1, 2021 – June 30, 2022

Total number of clients served under Rapid Rehousing	
Percentage of clients served that responded "Yes"	
Percentage of clients served that responded "No"	
Percentage of clients service that did not respond to survey	

HMIS/DV DATA ENTRY PERFORMANCE – RAPID REHOUSING

HUD requires all ESG grantees to enter required HUD data elements into HMIS or a comparable system. All applicants need to complete the performance section for HMIS/DV Data Entry.

MISSING HUD REQUIRED DATA

Add together the percentages of error rates for the HUD required data quality elements (Personally Identifying Information, Universal Data Elements, Income and Housing Data Quality, and Chronic Homelessness) entry fields to determine a total percentage. Next, divide this total by the number of data elements (18) to determine the percentage of missing data fields for each activity type funded by NHAP.

NOTE: Points will NOT be deducted for missing SSN information for victims of DV, SA, or Stalking (per VAWA regulations) or for immigrants who are not US citizens or nationals. Services cannot be withheld when necessary to protect life of safety.

PROGRAM NAME	% MISSING DATA FIELDS
Rapid Rehousing	<input type="text" value="0%"/>

For agencies with data error rates for SSN due to VAWA or immigration status, provide the percentage of error rates and explanation as needed.

Enter Explanation

HMIS/DV DATABASE BUDGET AND SERVICE DESCRIPTION

Funding Request

2021-2022 NHAP funding for HMIS/DV Database:

2021-2022 NHAP funding for HMIS/DV Database remaining as of July 1, 2022:

2022-2023 NHAP funding for HMIS/DV Database:

Requested 2023-2023 NHAP funding for HMIS/DV Database:

Please provide a brief explanation for any increase or decrease in requested HMIS/DV Database System funding:

HMIS/DV Database System	NHAP Request	Other Funds	Grand Total
HMIS Data Entry/Analysis Personnel	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hardware / Software	<input type="text"/>	<input type="text"/>	<input type="text"/>
Licensing Fees	<input type="text"/>	<input type="text"/>	<input type="text"/>
Equipment Costs	<input type="text"/>	<input type="text"/>	<input type="text"/>
Office Space	<input type="text"/>	<input type="text"/>	<input type="text"/>
Utilities	<input type="text"/>	<input type="text"/>	<input type="text"/>
Conference Fees	<input type="text"/>	<input type="text"/>	<input type="text"/>
Travel	<input type="text"/>	<input type="text"/>	<input type="text"/>
Indirect Cost Rate (if applicable): Rate %.	<input type="text"/>	<input type="text"/>	<input type="text"/>

HMIS TOTAL	<input type="text"/>	<input type="text"/>	<input type="text"/>
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HMIS/DV: Provide a narrative description of the activity being proposed and a detailed description of how each line item was calculated (e.g. breakdown of personnel costs, service cost calculations, methods of determining cost allocation percentages, detail of operational expenses, etc.). Provide the total amounts and a brief description of other funds utilized to support the agency's data collection efforts. If "Other Funds" is left blank or has a zero provide detail as to why no other funding is sought or received. Points will be deducted if the service narrative does not contain sufficient budget breakdown detail to replicate the calculated budget totals.

Enter Explanation

FORM 5 – CONTINUUM OF CARE (CoC) VERIFICATION

VERIFICATION OF PARTICIPATION

The Verification of Participation Form must be completed to include the number of CoC meetings held, the number of meetings attended by a representative of your agency, and a signature from the CoC's authorized person.

GROUP INFORMATION

Name of CoC Attended:

Type of CoC Meetings Attended:

☐ Regional Coalition

☐ Task Force

☐ Committee

☐ Workgroup

☐ Subcommittee

Name of CoC Authorized Person/Chair:

Authorized Person/Chair Email:

Authorized Person/Chair Phone Number:

AGENCY INFORMATION

Agency Name:

Name(s) of Staff that Attended Meeting(s):

MEETING INFORMATION (to be completed by the CoC Authorized Person)

Number of CoC Meetings Held:

Number of CoC Meetings Attended by Staff from this Agency:

Did the agency consult the CoC for project approval while preparing the 2023-24 NHAP application and its proposed activities?

☐ YES

☐ NO

Do the agency's proposed NHAP activities align with the CoC's priorities for serving persons experiencing homelessness and persons at risk of homelessness?

☐ YES

☐ NO

I verify the above information is accurate and current.

Signature of CoC's Authorized Person

Date

FORM 6 – ADDITIONAL PROGRAM APPLICATION REQUIREMENTS AND CERTIFICATIONS

SUBMISSION REQUIREMENTS	REQUIRED DOCUMENTATION	
1. Non-profit organizations must have an active Board of Directors within the last 12 months (not applicable to governmental agencies).	Board of Directors list, including phone numbers, email addresses, and titles	<input type="checkbox"/>
2. The applicant must have audited financial statements prepared by a qualified accountant or accounting service completed within the last 12 months or include a letter of justification if beyond that timeframe.	Copy of the applicant's most recent audit	<input type="checkbox"/>
3. Registered to conduct business in the State of Nebraska (not applicable for governmental applicants)	Current certification from the Nebraska Secretary of State or print out of active state from: https://goo.gl/cXOFX	<input type="checkbox"/>
4. Indirect cost rate (if applicable)	If seeking to utilize an indirect cost rate on a budget, the applicant must provide the current approved indirect cost rate agreement. If utilizing the "de minimus" rate, provide calculations to support the request.	<input type="checkbox"/>
5. Direct cost allocation (if applicable)	Applications with direct cost allocation requests must include sufficient documentation to demonstrate that costs were properly allocated.	<input type="checkbox"/>
6. Performance measurements	Supporting documentation provided to validate numbers reported for performance measurements section	<input type="checkbox"/>
7. Applicant's organizational chart	Diagram displaying the structure of the Applicant's organization if any changes since the 2022-23 NHAP RFA submission	<input type="checkbox"/>